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CONFIRMATION NO. 9895

SERIAL NUMBER 10/759,352	FILING DATE 01/16/2004 RULE	CLASS 220	GROUP ART UNIT 3727	ATTORNEY DOCKET NO. ITW 0008 PA/41038.12/1440
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APPLICANTS

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** CONTINUING DATA *****
None *7/5*

** FOREIGN APPLICATIONS *****
None *7/5*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 04/21/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i> Examiner's Signature Initials	STATE OR COUNTRY OH	SHEETS DRAWING 10	TOTAL CLAIMS 66	INDEPENDENT CLAIMS 5
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TITLE
 Fluid supply assembly

FILING FEE RECEIVED 1900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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